Rochester, N.Y. 14642. This university medical centre regularly holds courses for physicians and physical therapists, led by Dr. James Cyriax, an orthopedic medicine specialist from England. Secondly, one could write Dr. Charles Godfrey, President, North American Academy of Manipulative Medicine, 484 Church Street, Toronto, Ontario, M4Y 2C7.

I am writing this letter because of the frequent requests I get from several physicians in my own area for training centres in physical medicine. There is naturally a keen interest in this subject because of the frequency with which we see this problem.

R. G. Holmes, MD
Peterborough, Ont.

Prevalence of Cancer

In a review of the Annual Report of the Ontario Cancer Treatment and Research Foundation on page 155 of CANADIAN FAMILY PHYSICIAN, October 1976, Dr. Collyer presents data on expected numbers of new cancer cases, total number of cancer patients and cancer deaths in a typical family practice. I think there is an error in his calculations. The annual number of deaths from cancer cannot exceed the number of new cases. (Perhaps it might in one particular year, but it could not do so indefinitely.) Some years ago, I calculated that the number of new cases in the average British general practice would be seven per annum.[1] Current Canadian inci-

dence and mortality data can be used to calculate that the total number of new cases would be 2.8 per 1,000 population at risk, and the number of deaths would be 1.4 per 1,000.[2,3] I have had more difficulty calculating a prevalence rate and would be interested to know how Dr. Collyer derived the figure which he gave in his review.

J. M. Last, MD
Ottawa, Ont.

References
1. LAST, J. M., (1963) The Iceberg: Completing the Clinical Picture in General Practice. Lancet, 2:28.
2. Statistics Canada. Cancer in Canada, 1973.
3. Statistics Canada. Mortality Statistics, 1973.

Dr. Collyer replies:
As I look again at the statistics shown in the book, I too wonder how I found some of the figures. My figure of 3.1/1000 for total patients with cancer (prevalence), is in fact given as the crude incidence rate on page 54. As the authors refer elsewhere to 'New Cases Incidence', I mistakenly thought this crude incidence rate to be the prevalence rate. My own prevalence rate of 8+ comes from my own E-book, showing numbers of patients with cancer seen this year — a crude figure to be sure, but it gave a measure of my practice.

The mortality figures came from the page 48 list of crude cancer death rates for 1972 — 1.62/1000 males, and

1.36/1000 females — adding these to achieve population figures for 2,000, and dividing by 2, gives a mortality rate of 1.5/1000 for Ontario. The mortality figure of 3.7/1000 that I had initially escapes me.

The revised tables should read:

	Last	Cancer in Ont.	Collyer
Incidence (new cases per year)	2.8/1000	3.1/1000	0/1000
Prevalence (nos. with cancer)	–	–	3.4/1000
Mortality	1.4/1000	1.5/1000	0.8/1000

	Ontario rate	Average London Practice (1,800)	Collyer Practice (2,304)	
			Expected	Expected	Actual
Incidence	6.3/1000	11.3 cases	14.5	0
Prevalence	–	–	–	8+
Mortality	1.5/1000	2.7 deaths	3.4 deaths	2 deaths

I must apologize to you, to CANADIAN FAMILY PHYSICIAN and its readers. What started as an exercise to relate cancer statistics to an actual practice situation was not accurately done. Hopefully, it may still be of some interest.

J. A. Collyer, MD
London, Ont.

Mementos of the 7th World Conference on Family Medicine

Replicas of the Canada Goose in flight and Beaver, specially Canadian hand-crafted in solid copper and stamped WONCA 1976, in honour of the successful 7th Conference of the World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians recently held in Toronto are now available.

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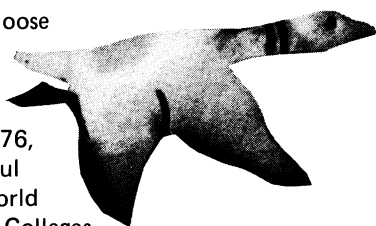
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